stated that we should have preferred not to find them described together. Considered apart in a medical work, there is less danger of their being confounded in practice. The terms "soft," "hard," "simple," and "infecting chancre," are also abandoned; to the initial lesion of syphilis the term *chancre* is exclusively applied, while the contagious ulcer that never infects the whole system is called *chancroid*.

After pointing out these changes, Dr. Bumstead thus concludes his preface:—

"The practical portion of the work has also undergone important alterations on various topics, among which may be mentioned the treatment of stricture by the 'immediate plan' of Mr. Holt; the abandonment of specific remedies in most cases of the initial lesion of syphilis; the preference given to the external rather than the internal use of mercury in secondary and tertiary syphilis; and the necessity of trusting to nature, aided by hygienic influences, and not to treatment indefinitely prolonged after the disappearance of all syphilitic manifestations, to eliminate the virus from the system. Numerous emendations and additions of a minor character have been made; every portion of the work has been carefully revised; a number of chapters have been rewritten; several new illustrations have been added; and no effort has been spared to render the present edition a complete treatise upon the subject of venereal, thoroughly on a level with the most advanced state of our knowledge."

Since the publication of the first edition of this work a good deal has been written upon syphilitic affections of the internal organs, and we should have been pleased to see some mention made of disease of the liver besides as a symptom of congenital syphilis, and of the influence which syphilis exercises in the development of Bright's disease. Within the past two months a gentleman, twenty-eight years of age, who had had primary disease five years ago, and who had been under our care for nearly a year with ulcerations on the leg and head from suppurated gummy tumours, which were almost entirely healed, became affected with general dropsy; his urine was found to be very highly albuminous and he died before four weeks had elapsed, from the extent of the effusion in the abdomen. No *post-mortem* examination was made, but, as Thudichum says, "the presence of albumen in the urine indicates a pathological condition of the kidneys, of a temporary, chronic, or permanent character," and the pathological condition which must have here existed we are induced to attribute to syphilis.

The progress in our knowledge of syphilitic disease during recent years is so constant, that it is singularly difficult to write a work "thoroughly on a level with the most advanced state of our knowledge." W. F. A.

ART. XX.—*A Treatise on the Chronic Inflammation and Displacements of the Unimpregnated Uterus.* By WM. H. BYFORD, A. M., M. D., Professor of Obstetrics, etc., Chicago Medical College, Medical Department Lind University. 8vo. pp. 215. Philadelphia: Lindsay & Blakiston. 1864.

IT is difficult to account for the difference of opinion which exists among medical men in regard to almost every point relating to the pathology of nearly all the morbid conditions of the uterus and its appendages, but especially as to their true relationship to the long catalogue of nervous phenomena so frequently met with in the female.

It would seem at first sight to be an easy task, if the disorders of the female sexual organs are of such frequent occurrence as they are supposed to be by many modern authorities, to settle definitively their character, and the sympathetic or reflex phenomena to which they give rise. But although treatise after treatise, written with the view of throwing light upon these subjects, has appeared within the last quarter of a century, physicians would appear to be as far as ever from accord in respect to them.

The difficulty in the way of arriving at the truth in this as in other fields of observation exists less in the intricacy of the question to be solved than in the too common error having been fallen into of assigning to single facts or to a limited series of facts too prominent and wide an agency in the explanation of phenomena commonly, but not invariably, associated with them than in men.

The leading purpose of the essay before us is to determine the relationship which exists between chronic inflammation and displacements of the unimpregnated uterus and the nervous symptoms general and local, which, although not exclusively confined to women, are more frequently observed in them.

It having been found that a great variety of nervous phenomena, varying in character and degree in different cases, and occasionally exhibiting the utmost severity, are in very many cases associated with some morbid condition of the uterus, the latter have been assumed by a large and highly respectable portion of the profession, as their most common, if not their only cause; reviving thus the doctrine of hysteria as taught by the older physicians. It is maintained that the sexual system of the female, when in a diseased condition, exercises a morbid influence over nearly the whole organism, but more especially over the spinal and cerebral nervous systems, and that the only sure and permanent relief when such sympathetic morbid phenomena occur, is to be found in the removal of the disordered condition of the uterus.

By one class the morbid influence exerted by the uterus upon the cerebro-spinal nervous system is believed to be manifested only when the organ is in a state of inflammation or ulceration; by another it is referred mainly, if not entirely, to some form or degree of displacement of the organ, independent of inflammation or ulceration—though both the latter may take place as a result of the displacement; while, by a third class, it is maintained that the hypersthenia or other diseased condition of the uterus, so often found associated with certain general nervous phenomena, is not to be taken as the cause of the latter, but in common with these is to be referred, in the majority of cases, to a morbid condition of the cerebro-spinal system of nerves, induced most commonly by a course of life in direct violation of the recognized laws of hygiene; though, occasionally, brought about by chronic disease of some important organ other than the uterus.

The views advocated by Dr. Byford in the work before us coincide with those of such as believe in the great sympathetic influence of the uterus, and that inflammation and its accompanying effects are the conditions upon which its sympathetic energies depend. If such be really the case, we see no difficulty in the way of its truth being established by a course of clinical observations, while we do not believe that it can be done satisfactorily by a series of analogical reasonings. Dr. Byford asserts, "after an observation of a large number of unmistakable cases, that the unimpregnated diseased uterus does produce grave and even fatal disorders in other parts of the organism by its reflex or sympathetic influence." Such is also the testimony given by others who have made these diseases their special study; and we admit the testimony to be founded in truth. Others, however, founding their conclusions from the facts culled by them from out a wide field of observations, deny the frequency of uterine disease; when it does occur they ignore its agency in the production of the general nervous symptoms with which it is found, in certain cases, to be associated. It is between these two extremes that the true conclusion we suspect will be found to lie. While, in very many instances, the hypersthenic, congested, and even subacutely inflamed state of the uterus, and the general morbid phenomena with which the uterine disease is associated are due to a common cause, it is very certain that in other, and by no means a limited number of, cases, the general symptoms are the direct result of the disease of the uterus. The strongest evidence in proof of the latter statement is the fact stated by Dr. Byfield, perhaps, in too absolute a manner, however, that the general symptoms will be found to subside after the local disease is cured.

"It is said," remarks Dr. Byford, "by those who deny the local origin of female nervous symptoms, that the general treatment is such as to insure a cure of the local disease in spite of local irritants. Dr. Bennett and all other judicious writers very properly direct the use of general treatment, yet they state

that it is not in most cases essential to a cure; that it is merely palliative, or at most, auxiliary. This may be readily verified by anybody who will observe the effects of both treatments. I am prepared to say that I do not believe it best, in the majority of cases that come under the observation of general practitioners, to resort to any studied general treatment, and that I believe some of the general management resorted to is injurious instead of beneficial. One measure in particular, very generally recommended—confinement to the horizontal position—I consider as almost invariably fraught with mischief. Seventy-five per cent. of the cases I have treated have had no general treatment: the local being quite sufficient. It will not do, therefore, to say that my cases were cured by the general treatment advised. I think that general treatment is essential in a few instances only, in conjunction with the local. It is, at best, but auxiliary. That inflammation and its consequences are the cause of these multitudinous ailments is most satisfactorily proved, I repeat, by their entire removal by this local treatment. Experiment is the best means of convincing an impartial practitioner of the accuracy of the theory of the local origin of so many general symptoms.

"I have been often asked by medical men why it is that after a woman has improved to a certain point under the influence of local treatment, giving promise of a satisfactory cure, all progress ceases, and the cure remains imperfect. In a few instances I have had an opportunity of examining such cases, and have found that there was still sufficient inflammation to account for the state of the case, and further local treatment removed the impediment to a cure, and perfected it. It would be contrary to all other instances in which general or secondary affections arise from sympathetic influence, if some of the secondary affections did not outlast the primary disease. No proper objection can be urged against the theory in consequence of this fact, as it is only in accordance with other examples. The cases in which the general symptoms do not subside after the cure of the local (when the former are the consequence of the latter) are not very frequent exceptions to the general rule, that to remove the cause is to cure the disease. And when the general symptoms are not cured the condition of the patient is generally, if not invariably, improved by the removal of some and the amendment of other symptoms."

It will be impossible for us to follow the author in his analysis of the general and local symptoms to which disease of the uterus is liable to give rise, nor is it necessary, as these symptoms do not occur alike in every case; nor can any one, or even several of them combined, be considered as certainly pathognomonic of disease of the uterus, for in no case can the presence of the latter be safely affirmed unless it has been made manifest by the touch or sight.

The general symptoms to which disease of the uterus gives rise are of almost every character, and of varying grades of intenseness, from the most trifling to a degree that would appear to threaten with prompt extinction the life of the patient. They consist in disturbances of the stomach and bowels, and of the nervous system generally. There is scarcely a disagreeable or painful sensation that is not experienced, and which often gains for the patient but little commiseration, because her appearance does not correspond with the apparent severity of her symptoms, and from the fact that she will pass from a state of excruciating suffering and loud complaints, under a little excitement, to one of actual enjoyment and hilarity. The most common of the disagreeable sensations and pains referred to are cephalalgia, partial or general; pain in the course of the spine; about the hypogastrium, groins, sacrum, and the region of the pelvis generally. There is an increased secretion of urine, usually limpid, odourless, and insipid, but sometimes it is highly charged with salts, giving rise to frequent painful micturition and other disagreeable sensations: occasionally there is a diminished secretion of urine. In some cases the mammæ become congested, hot, and painful. There is, commonly, a sense of weight or bearing down; often leucorrhœa, painful menstruation, menorrhagia, and sometimes amenorrhœa. The mental and moral qualities of the patient are liable to the same strange, extravagant, and startling aberrations that mark the more severe attacks of hysteria. All or the greater number of these symptoms may be present in the same case; but more commonly, in different cases, certain of them, only, will be

prominent, while others of them are wanting; nor is the importance or the severity of the general symptoms always in proportion to the amount of local disease in the uterus.

The chapter on the complications of inflamed cervix is replete with interest. The complications referred to are vaginitis, urethritis, rectitis, cystitis, cellulitis, or ovaritis, and displacements of the uterus, each of which is cursorily described.

Displacements Dr. B. supposes to be an effect of the pre-existing inflammation, which, by increasing the size and weight of the uterus, causes it to settle down; the sufferings to which it gives rise being produced by the pressure of the displaced organ upon morbidly susceptible organs, made so, perhaps, by a long continuance of the pressure, and by the sense of soreness in the inflamed uterus itself, and also in part by traction upon the lateral and round ligaments.

"Still," Dr. B. remarks, "I have no question that in very rare instances the displacement results from other causes than inflammation, and then I can easily comprehend how it may produce inflammation in the uterus. The circulation must be embarrassed, congestions will readily occur on account of pressure and forcible flexion of the veins and arteries, and inflammation is very apt to follow long-continued congestion," &c.

After describing the position of the uterine inflammation under the heads of *sub-mucous* or *fibrous*—with its consequences, hypertrophy and induration, or atrophy with induration; *mucous inflammation*, of the cavity of the cervix, of the cavity of the uterus, Dr. B. describes its progress and termination in each of these cases. This and the ensuing chapter, on the diagnosis of inflammation of the womb, are very well drawn up, and will be found full of instruction by the young practitioner. They contain nothing, however, particularly novel.

In the chapter on the general treatment of chronic uterine inflammation will be found an excellent summary of the therapeutic measures which the author's experience has approved as those best adapted to conduct the disease, in the several conditions under which it presents itself, to a favourable termination. We entirely agree with him in believing that, in the great majority of instances, the patients labouring under chronic inflammation of the womb are injured, rather than benefited, by confinement in the recumbent position.

"More than ordinary acuteness of the symptoms," says Dr. B., "indicating a high degree of inflammation, occurring in the beginning and continuing throughout, or arising during the progress of a case as the effect of temporary causes, will make rest indispensable to the removal of them. Hemorrhage at the time of menstruation, or between the menstrual periods, is also a reason for strict quiet. Where neither of these conditions is presented I think the patient will, in most cases, be much benefited by judiciously directed exercise. I feel like insisting upon the enforcement of out-door exercise as the rule in these cases, for I have often had an opportunity of contrasting in the same cases the influence of quiet and exercise upon the recovery of patients of delicate nervous constitutions."

We call attention to the very judicious remarks of the author on the treatment of the general nervous prostration and nervous excitability so often observed in different cases in connection with chronic uterine affections. In fact, the entire series of therapeutical directions given by him to meet the several symptoms which are commonly attendant upon chronic inflammation of the uterine organs are well worth a careful study; they bear throughout the characteristics of careful observation and sound judgment.

By general treatment alone Dr. B. does not believe, however, that a cure was ever effected. In respect to the local treatment recommended by him we see little or no improvement over that laid down by almost every other writer on the disease under consideration. Baths, especially hip or sitz-baths, shower-baths, and sponge-baths; injections of simple water, or medicated by the addition of various astringent substances, are applicable alike to almost all cases, while in simple mucous inflammation, or ulceration, Dr. B. has been in the habit of using most frequently, and, in fact, almost exclusively, after the various depletory measures, nitrate of silver, tannin, acid nitrate of mercury, nitric acid, and caustic potassa, as local remedies. The nitrate of silver is the application

most frequently employed, and is considered by him the standard remedy in cases of inflammation and ulceration of the *mucous membrane* of the os and cervix uteri. For the mode of employing the nitrate of silver, the frequency with which its application should be repeated, the length of time its use should be continued, and the nature of the substitutes proposed for it when it fails to do good, we must refer our readers to the twelfth chapter of Dr. Byford's treatise, where he will find these subjects treated of at considerable length.

The treatment of sub-mucous inflammation complicated with ulceration is next considered, and the value of scarification, leeching, the seton and issue in its removal, and the circumstances and mode in which they are to be employed examined. The treatment of hardness and enlargement of the cervix uteri consists, so long as tenderness, heat, and other signs of an acute condition are present, in leeching or cupping, cathartics, alteratives, anodynes, until these symptoms are removed or very much relieved: then, if the increase in size continues, and is considerable, Dr. B. advocates the application of the caustic potash, so as to cause an absorption of the fibrinous deposition on which the enlargement depends.

In the author's account of displacements of the uterus, their philosophy and treatment, we find nothing particularly novel. As we have already seen, he classes these displacements, in the majority of cases, as one of the results of inflammation, and believes that they can only be remedied by removing the diseased condition of the uterus upon which they depend. His remarks on supporters and pessaries will be read with profit. Though not, evidently, a very strong advocate for the pessary in the usual run of cases of uterine displacements, Dr. B. still concedes to them, in our opinion, too much credit as remedial measures in such cases. The cases in which they are calculated to afford relief are, we believe, but few, while those in which they are liable to do much mischief are of constant occurrence. D. F. C.

ART. XXI.—*Report of the Board of Health of the City and Port of Philadelphia to the Mayor, for the year* 1863. 8vo. pp. 56.

FROM the annual reports of the several Boards of Health, the sanitarian would naturally expect to derive important materials to assist him in his investigation into the state of health of our cities, and into the sources of whatever diseases may be found to prevail endemically in either of them. How far the reports of other boards may be found to realize this reasonable expectation we shall not stop to inquire. Our present business is with the report before us. This, we are sorry to say, presents but few facts bearing directly upon the sanitary condition of Philadelphia, and these few are given in so general and vague a form as to deprive them of nearly all value as a basis for any safe conclusions.

The style of the report, too, is in the highest degree slovenly and incorrect. Upon almost every page violations of the simplest rules of grammar are to be met with; while many of its sentences are so awkwardly framed as to require for the elucidation of their true meaning some degree of guess-work.

As an example of the clumsy, almost unmeaning sentences with which the report, short as it is, abounds, take the following:—

"With the exception of a very limited number of cases of an unusual form of fever, commonly called 'spotted fever;' and a general prevalence of 'influenza,' there has been no evidence of any epidemic influence *whereby the figures of an unusual percentage of deaths for the year should be increased.*"

"In the absence of any provision by the proper authorities to accommodate such cases" (those of smallpox), "the Board, in view of the emergency, directed an unoccupied building at the Lazaretto to be prepared for their reception. From that time to the present every applicant *effected* with this disease has been conveyed to said building."